



Case Docket No. P-4744

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re: Patent Application

Applicant(s): Robert A. Hoffman et al. Docket No.: P-4744
Serial No.: 09/691,155 Group Art Unit: 2877
Filing Date: October 19, 2000 Examiner: Geisel, Kara E.
For: **An Apparatus And Method Employing Incoherent Light Emitting Semiconductor Devices As Particle Detection Light Sources In A Flow Cytometer**

RESPONSE UNDER 37 C.F.R. 1.111

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicants submit the following amendments and remarks in response to the Office action of December 15, 2003, and request entry of the amendments and remarks into the record.



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PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031
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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/691,155	
	Filing Date	October 19, 2000	
	First Named Inventor	Robert A. Hoffman	
	Art Unit	2877	
	Examiner Name	Kara E. Geisel	
Total Number of Pages in This Submission	8	Attorney Docket Number	P-4744

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Return Receipt post card
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Douglas A. Petry, Ph.D.
Signature	
Date	March 18, 2004

CERTIFICATE OF TRANSMISSION/MAILING

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Signature		Date	March 18, 2004

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